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| **Az adóhatóság tölti ki!**  Benyújtás, postára adás napja: | |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  | év |  |  | hó |  |  | nap | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ az átvevő aláírása |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| I. Adóalany | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 1. Adóalany neve (cégneve): | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 2. Születési helye: | | | |  | | | | | | | | | | | város/község, ideje: | | | | | | |  |  |  |  | év | |  |  | hó | |  |  | nap | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 3. Anyja születési családi és utóneve: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 4. Adóazonosító jele: | | | | |  |  |  |  |  |  |  |  |  |  | Adószáma: | | | | | | | |  |  |  |  |  |  |  |  | - |  | - |  |  |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 5. Statisztikai számjele: | | | | | |  |  |  |  |  |  |  |  | - |  |  |  |  | - |  |  |  | - |  |  |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 6. Pénzintézeti számlaszáma: | | | | | | |  |  |  |  |  |  |  |  | - |  |  |  |  |  |  |  |  | - |  |  |  |  |  |  |  |  |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 7. Székhelye, lakóhelye: | | | | |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 8. Levelezési címe: | | | |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | 9. Telefonszáma: | | | |  | | | | | | | | | | | | e-mail címe: | | | | |  | | | | | | | | | | | | | | |  |
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| II. Gépjármű adatai | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | 1. Rendszám: | | |  | | | | | | | | (Amennyiben volt, akkor korábbi rendszám: | | | | | | | | | | | |  | | | | | | | | ) | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 2. Alvázszám: | | |  | | | | | | | | | | | | | Teljesítménye (kilowatt vagy lóerő): | | | | | | | | | |  | | | | | |  | | | | |
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| III. Az adómentesség jogcíme | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | a) az adóalany költségvetési szerv, b) az adóalany alapítvány, egyesület | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | c) helyi és helyközi tömegközlekedést lebonyolító adóalany autóbusza, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | d) egyházi jogi személy tulajdonában lévő jármű, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | e) tűzoltó szerkocsi, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | fa) súlyos mozgáskorlátozott adóalany gépjárműve ( a bevalláshoz csatolni kell a mentességet igazoló iratot), | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | fb) súlyos mozgáskorlátozott kiskorú személyt szállító szülő (adóalany) gépjárműve ( a bevalláshoz csatolni kell a mentességet igazoló iratot), | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | fc) cselekvőképességet korlátozó (kizáró) gondnokság alatt álló súlyos mozgáskorlátozott nagykorú személyt | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | rendszeresen szállító szülő (adóalany) gépjárműve ( a bevalláshoz csatolni kell a mentességet igazoló iratot), | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | g) kizárólag elektromos hajtómotorral ellátott személygépkocsi | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | h) az a gépjármű, amelynek adómentességét nemzetközi egyezmény vagy viszonosság biztosítja, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | i) az Észak-atlanti Szerződés Szervezete, továbbá az Észak-atlanti Szerződés tagállamainak és az 1995. évi LXVII. törvényben kihirdetett békepartnerség más részt vevő államainak Magyarországon tartózkodó fegyveres erői tulajdonában lévő gépjármű. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| IV. Az adómentességre való jogosultság kezdete/vége | | | | | | | | | | | | | | |  |  |  |  | év | |  |  | hó | |  |  | nap | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| V. Súlyos mozgáskorlátozott kiskorú személy vagy a cselekvőképességet korlátozó (kizáró) gondnokság alatt álló súlyos | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **V. Súlyos mozgáskorlátozott kiskorú személy vagy a cselekvőképességet korlátozó (kizáró) gondnokság alatt álló súlyos mozgáskorlátozott mozgáskorlátozott nagykorú személy adatai** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 1. Neve: | |  | | | | | | | | | | | | | | | | | Adóazonosító jele: | | | | | | |  |  |  |  |  |  |  |  |  |  |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 2. Születési helye: | | | |  | | | | | | | | | | | | | város/község, ideje: | | | | | |  |  |  |  | év | |  |  | hó | |  |  | nap | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 3. Anyja születési családi és utóneve: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 4. Lakóhelye: | | |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **VI. Adófizetési kötelezettség szünetelése (gépjármű jogellenes eltulajdonítása esetén)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | |  | Adófizetési kötelezettség szünetelésének bejelentése | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1.1. | | | Az igazolást kiállító rendőrhatóság megnevezése: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1.2. | | | Igazolás kelte: |  |  |  |  | év | |  |  | hó | |  |  | nap, | | iktatószáma: | | | | |  | | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1.3. | | | Igazolt időszak kezdete: | | | | |  |  |  |  | év | |  |  | hó | |  |  | nap | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | |  | Adófizetési kötelezettség szünetelés végének bejelentése: | | | | | | | | | | | | | szünetelés vége | | | | |  |  |  |  | év |  |  | hó |  | |  | nap | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **VII. Felelősségem tudatában kijelentem, hogy a bevallásban közölt adatok a valóságnak megfelelnek.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| helység | | | | | | | | | | | év | | | | hó | | | | nap | | az adózó vagy képviselője (meghatalmazottja) aláírása | | | | | | | | | | | | |